



Permit Type: _____ Number: _____

COMMERCIAL CONSTRUCTION PERMIT APPLICATION
INFORMATION BULLETIN NO. 110 - Part D (Revised June 24, 2015)
 City Planning & Development Department - Development Services
 City of Kansas City, Missouri. www.kcmo.gov/planning

1) APPLICANT, PLEASE COMPLETE ALL OF THE FOLLOWING INFORMATION (PLEASE PRINT):

(Note: The City of Kansas City, Missouri does not regulate or review County, State or Federally owned projects.)

Project Name:									
Project Address:									
Scope of Project (New Building, Building Addition, Tenant Finish, Grading, new/modification to fire sprinkler etc.):									
Board of Zoning Adjustment and/or City Plan Commission Case No.:									
Number of Submitted Plans:		Specs:		Structural Calcs:		Soils Reports:		Stormwater Studies:	
Additional information submitted:									

Fire sprinkler applications Please indicate related building permit number or plan review control number CR/CPB/CPFT _____

2) PLEASE LIST ADDRESS TO WHICH CPD-DS IS TO SEND PLANS REVIEW COMMENTS:

Applicant's Company Name:			
Contact Person:		Position:	
Address:			
City:		State:	Zip:
Phone:	Extn:	Fax:	e-mail:

3) PERMIT VALUATIONS, construction values to be used in permit fee calculation shall include the total value of the work for which the permit is issued and are typically contract values. When materials, labor or equipment are provided by others, the value of those items shall be included in the valuation for the scope of work in the permit to which they apply.

PERMIT TYPE	CONSTRUCTION VALUATION
Building Permit including site work	\$
Mechanical Permit	\$
Electrical Permit	\$
Plumbing Permit	\$
Fire Sprinkler Permit	\$
Elevator Permit	\$
Fire Alarm Permit	\$
Mechanical refrigeration permit (units > 7.5 tons)	\$
Total Project Construction Valuation	\$

*** PROVIDE SEPARATE TOTAL PROJECT AND PERMIT VALUATIONS. IF THE PROJECT CONTAINS SEPARATE BUILDINGS, PERMIT FEES SHALL BE CALCULATED SEPARATELY FOR EACH BUILDING. A PLANS REVIEW FEE OF 1/2 THE BUILDING PERMIT FEE (BASED ON BUILDING VALUATION INCLUDING SITEWORK) IS REQUIRED WHEN THE PLANS ARE SUBMITTED FOR INITIAL REVIEW. TOTAL PROJECT AND PERMIT VALUATIONS SHALL INCLUDE THE VALUE OF ALL WORK ON PRIVATE PROPERTY ONLY.**

Scheduled Express review fee/Changes to approved plan fee if applicable _____

This page is not required to be filled out and submitted for projects that would qualify for an express review per [Information Bulletin 115](#) and for fire sprinkler/fire alarm applications.

4) PLEASE IDENTIFY THE OWNER'S DESIGN PROFESSIONAL IN RESPONSIBLE CHARGE (DPRC):

Design Professional in Responsible Charge (DPRC):			
Company Name:			
Address:			
City:		State:	Zip:
Phone:	Extn:	Fax:	e-mail:

5) PLEASE CERTIFY THE SUBMITTAL CHECKLIST:

I hereby certify that I am the owner's registered design professional in responsible charge (DPRC) and that I have reviewed the submittal Checklist to identify the requirements for the specific project being submitted for plans review. I certify that this submittal is complete for review of the scope of work as described herein and I further understand that omission of required information will result in delays in the plans review approval process.

Certified by: _____ DATE: _____
 Print name: _____ State Registration Number: _____

Deferred Submittals: _____
 Does the proposed work constitute a change in use and/or occupancy of the existing building per building code definitions. ☐ Yes ☐ No

6) Parcel and Related Information Checklist:

Parcel and Related Information (telephone nos. reference information sources- Area Code 816):	List applicable case numbers, dates, status and/or required data (attach related letters and documents):
*Current Zoning District	513-1500
*Proposed Zoning District	513-2846
*CPC/BZA Case Number	513-2846
*CPD-DS Prelim. Code Review Mtg Date(s)	513-1500
*CPD-DS Team Inspection Assessment	513-1500
*CMR/BFCBA Number(s)	513-1500
*Special Review District	513-2855
*Flood Zone/ Floodplain Development Permit	513-1500
*Landmarks Case Number	513-2902
*Encroachment Permit Number	513-1500
*Land Disturbance Permit Number	513-2551
*Developer Contributions/Impact Fees	513-2551
*Plat Name/ Lot Split Number/SD Case Number	513-2846
*Development Assistance Team Project No.	513-2880
*Airport Height Zone	513-1500
*Development plan/special use permit approval	513-2846
*Empowerment Zone	513-2880
*County Assessor's Parcel Number(s)	
*Note: Much of this information can also be obtained at	www.kcmo.gov/planning

Department Use Only:

Control Number: _____	Total Permit Fee: \$ _____	Checked By: _____
QCR Submittal Date: _____	Plan Check Fee: \$ _____	Zoning: _____
Log-in Date: _____	Permit Fee Due: \$ _____	QCR By: _____

AV ☐ DMD ☐ FD ☐ HA ☐ HF ☐ HP ☐ IW ☐ LM ☐ LQ ☐ PR ☐ LDD ☐ SR ☐ TR ☐ WD ☐ CHAP 52 ☐
 EV ☐ FL ☐ FA ☐ FP ☐ EL ☐ ME ☐ NS ☐ PL ☐ SPK ☐ ZN ☐ WESTORM ☐ LC ☐ CPBONDFORM ☐
 CISASSIGN ☐ SI ☐ ST ☐ CPSEC8 ☐ IMPACTFE ☐ WSDFLD ☐